HCFA-AT-85-3 Vermont OFFICIAL,

Supplement #6 To ATTACHMENT 2.6-A

Standards for Optional State Supplementary Payments

	Administered by			vel (Monthly)*
Payment Category (Reasonable Classification)	Federal	State	One person with gross income ≤ \$1,500 per month	Couple with gross income ≤ \$3,000.00 per month
Independent Living Outside Chittenden County	X		\$557.66	\$859.28
Independent Living Chittenden County	X		\$557.66	\$859.28
Another's Household	X		\$371.72	\$547.86
Licensed Residential Care Level III (Limited Nursing Care)		X	\$760.87	\$1,340.54
Licensed Residential Care Level III (Assistive Community Care)	X		\$547.25	\$845.50
Licensed Residential Care Care Level IV	X		\$718.69	\$1,299.89
Custodial Care Family Home	X		\$596.38	\$1,076.02
Long-Term Care (Medicaid Payment)	X		\$47.25	\$94.50

^{*}Vermont applies federal SSI program eligibility criteria, income disregards, and resource limitations.

42 CFR 435.1005 42 CFR 435.1006

1 > 00-13		Effective date:	0 00
Supersedes	Approval date:	Priocure date.	
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